PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							^	Application or Docket Number 10/711,720			ing Date 30/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FI	LED	NUMBER EXTRA		Г	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		l	N/A]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A	N/A		N/A		N/A]	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A			N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mi	nus 20 = *			l	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	minus 3 = *			l	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE S	If the specification and drawi sheets of paper, the applicati is \$250 (\$125 for small entity additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37			or each thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENT													
AMENDMENT	09/10/2009	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(1))	• 7	Minus	 20		= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	3		= 0	1	x \$ =		OR	X \$220=	0	
M	Application Size Fee (37 CFR 1.16(s))												
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))						l			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
_		CLAIMS REMAININ AFTER AMENDME	VG	HIGHES NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))		Minus	**				x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	***				x \$ =		OR	x s =		
Ш	Application Size Fee (37 CFR 1.16(s))]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.												

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